

Amendment to the Claims:

This listing of claims replaces all prior versions, and listings, of claims in the application:

1-9. (Canceled).

10. (Currently amended) A method for assessing progress of valvular dysfunction of a patient comprising:

determining flow parameters of a patient's valve using non-invasive techniques, said flow parameters including an amount of flow over time in an annulus, a diastolic filling period and information indicative of a size of said annulus;

using only said flow parameters to determine a Formation number indicative of cardiac information including information about said annulus, where said Formation number is a non-dimensional parameter;

providing a baseline data of Formation number (Fn) from said patient;

measuring a patient's Fn over time; and

comparing the measured Fn to said baseline data so as to obtain a differential Fn; and

using the differential Fn as an assessment of a progress of the valvular dysfunction.

11. (Original) The method of claim 10, wherein the valvular dysfunction is selected from a group consisting of dilated cardiomyopathy, hypertrophic cardiomyopathy, ischemic cardiomyopathy, and restrictive cardiomyopathy.

12. (Original) The method of claim 10, wherein the valvular dysfunction is atrial fibrillation.

13. (Original) The method of claim 10, wherein the Fn is measured by using a noninvasive procedure of ultrasound scanning.

14. (Previously presented) The method of claim 10, wherein said determining the Fn uses a noninvasive procedure of MRI (magnetic resonance imaging) scanning.

15. (Previously presented) The method of claim 10, wherein said determining the Fn uses a noninvasive procedure of an electromagnetic imaging technique.

16. (Original) The method of claim 11, wherein the valvular dysfunction is ventricular dysfunction.

17. (Currently Amended) A method for assessing the valvular functions of a patient after a cardiac operation comprising:

determining flow parameters of a patient's heart using non-invasive techniques, said flow parameters including an amount of flow over time in an annulus, a diastolic filling period, and information indicative of a size of said annulus;

using only said flow parameters to determine a Formation number indicative of cardiac information, where said Formation number is a non-dimensional parameter;

providing a baseline data of Formation number (Fn) from said patient before said operation;

measuring a patient's Fn intermittently after said operation; and

comparing the measured Fn to said baseline data so as to obtain a differential Fn; and

using the differential Fn to assess an effectiveness of the operation.

18. (Original) The method of claim 17, wherein the cardiac operation is selected from a group consisting of valve replacement, annuloplasty ring replacement, valve repair, annular tissue shrinkage, and percutaneous annulus repair.

19. (Original) The method of claim 17, wherein the  $F_n$  is measured by using a noninvasive procedure of ultrasound scanning.

20. (Original) The method of claim 17, wherein the  $F_n$  is measured by using a noninvasive procedure of MRI (magnetic resonance imaging) scanning.

21. (Original) The method of claim 17, wherein the  $F_n$  is measured by using a noninvasive procedure of an electromagnetic imaging technique.

22. (Previously presented) A method as in claim 10, wherein said formation number is a dimensionless number.

23. (Previously presented) A method as in claim 17, wherein said formation number is a dimensionless number.